Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	dentify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your	full name		
	your g	the name that is on government-issued e identification (for	Ishtiyaq First name	First name
	example, your driver's license or passport).	Ahmed Middle name	Middle name	
	Bring your picture identification to your		Ansari	
		ng with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		her names you have in the last 8 years		
		de your married or en names.		
3.	your s numb Indivi	the last 4 digits of Social Security per or federal idual Taxpayer ification number	xxx-xx-5673	

Entered 02/19/16 16:10:27 Page 2 of 54 Doc 1 Filed 02/19/16 Desc Main Case 16-05499 Document

Case number (if known)

Debtor 1 Ishtiyaq Ahmed Ansari

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		2255 S. Highland Ave. Apt. 208 Lombard, IL 60148				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		DuPage County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Entered 02/19/16 16:10:27
Page 3 of 54
Case number (if known) Doc 1 Filed 02/19/16 Desc Main Case 16-05499

Document Case number (if known) Debtor 1 Ishtiyaq Ahmed Ansari

7.	The chapter of the	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7					
-	Bankruptcy Code you are						
	choosing to file under						
		☐ Cr	napter 11				
		☐ Ch	napter 12				
		☐ Ch	napter 13				
}.	How you will pay the fee		about how yo	u may pay. Typically, if you are paying the attorney is submitting your payment on you	e check with the clerk's office in your local court for more details fee yourself, you may pay with cash, cashier's check, or money ur behalf, your attorney may pay with a credit card or check with		
				the fee in installments. If you choose the in Installments (Official Form 103A).	is option, sign and attach the Application for Individuals to Pay		
			I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a but is not required to, waive your fee, and may do so only if your income is less than 150% of the official po that applies to your family size and you are unable to pay the fee in installments). If you choose this option,				
					ived (Official Form 103B) and file it with your petition.		
).	Have you filed for bankruptcy within the	■ No	-				
	last 8 years?	☐ Yes					
			District		Case number		
			District		Case number		
			District	When	Case number		
0.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.				
			Debtor		Relationship to you		
			District	When	Case number, if known		
			Debtor		Relationship to you		
			District	When	Case number, if known		
1.	Do you rent your	□ No.	. Go to I	ne 12.			
	residence?	■ Yes	s. Has yo	ur landlord obtained an eviction judgment a	against you and do you want to stay in your residence?		
			•	No. Go to line 12.			
				Yes. Fill out <i>Initial Statement About an Ev</i> bankruptcy petition.	viction Judgment Against You (Form 101A) and file it with this		

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

		Document	Page 4 of 54	
Debtor 1	Ishtiyag Ahmed Ansari		Case number (if known)	

Part	Report About Any Bus	sinesses	You Own	as a Sole Propriet	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	e and location of bus	niness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Sta	te & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am ı	not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	A: Report if You Own or	Have Ans	Hazardo	ous Property or Any	y Property That Needs Immediate Attention			
	Do you own or have any		Tiazarac	ous i roperty of Air	y Froperty That Needs infinediate Attention			
	property that poses or is	■ No.						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Otrest Oils Orde 9 7% Orde			
					Number, Street, City, State & Zip Code			

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Page 5 of 54 Document

Debtor 1 Ishtiyaq Ahmed Ansari Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions about finances.

My physical disability causes Disability.

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am no	t required to rece	ive a briefing	about credit
counse	ling because of:		

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 6 of 54 Case number (if known) Debtor 1 Ishtiyaq Ahmed Ansari Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10.000.001 - \$50 million □ \$1.000.000.001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million estimate your liabilities □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Ishtiyaq Ahmed Ansari

Ishtiyaq Ahmed Ansari Signature of Debtor 1

Signature of Debtor 2

Executed on February 19, 2016

MM / DD / YYYY

Executed on

MM / DD / YYYY

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Page 7 of 54 Document Case number (if known)

Debtor 1 Ishtiyaq Ahmed Ansari

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jason	P. Allain	Date	February 19, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Jason P. A	Allain		
Ledford, V	Vu & Borges, LLC		
Firm name			
105 W. Ma	dison		
23rd Floor	r		
Chicago, I	L 60602		
Number, Street,	City, State & ZIP Code		
Contact phone	312-853-0200	Email address	notice@billbusters.com
6304575			
Bar number & S	tate		

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

		170.000		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Ishtiyaq Ahmed A	Ansari		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		8,885.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	8,885.00
Paı	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	5,365.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	67,376.69
	Your total liabilities	\$	72,741.69
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,152.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,090.50
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a handled purposes," 14.1 H. C. C. S. 404(0). Fill publicate 8.00 for a statistical purposes, 20.1 H. C. C. S. 450	a personal	, family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Case 16-05499 Doc 1 Document

Page 9 of 54 Case number (if known) Debtor 1 Ishtiyaq Ahmed Ansari

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,501.60

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clain	1
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	s \$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

Document Page 10 of 54 Fill in this information to identify your case and this filing: Debtor 1 Ishtiyaq Ahmed Ansari First Name Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Honda Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Civic ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Year. 2008 Debtor 2 only Current value of the Current value of the Approximate mileage: 62000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$5,025.00 \$5,025.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$5.025.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured

claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

page 1

Debtor 1	Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Document Page 11 of 54 Case number (if known)	Desc Main
_		
■ Yes.	Misc used household goods and furnishings, including: Sofa, Loveseat, Dining Table/Chairs, Pots/Pans, Dishes/Flatware, Vacuum, Bedroom Sets, Lamps, Misc. Tools	\$400.00
□ No	ics es: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music of including cell phones, cameras, media players, games Describe	collections; electronic devices
	Television, DVD Player	\$200.00
Example No	oles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin other collections, memorabilia, collectibles Describe	, or baseball card collections;
	Books & Family Pictures	\$50.00
■ No □ Yes. 10. Firearm Examp ■ No □ Yes. 11. Clother Examp	les: Pistols, rifles, shotguns, ammunition, and related equipment Describe	and kayaks; carpentry tools;
	Necessary Wearing Apparel	\$400.00
■ No □ Yes. 13. Non-fal Examp ■ No □ Yes. 14. Any otl ■ No	les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gems, gescribe Imanimals les: Dogs, cats, birds, horses Describe Describe Describe	gold, silver
☐ Yes.	Give specific information	
	ne dollar value of all of your entries from Part 3, including any entries for pages you have attached rt 3. Write that number here	\$1,050.00

Part 4: Describe Your Financial Assets

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 12 of 54 . Case number *(if known)* Debtor 1 Ishtiyaq Ahmed Ansari portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$150.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Fifth-Third Bank \$78.00 17.1. Checking Fifth-Third Bank \$4.00 Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No Institution name or individual: ■ Yes. Security Deposit with Landlord: \$500.00 \$0.00 Rental deposit

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes...... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

		Case 1	6-05499	Doc 1	Filed 02/19/16 Document	Entered 02/19 Page 13 of 54)/16 16:10:27	Desc Main
De	ebtor 1	Ishtiyaq A	hmed Ansa	ri	Boodinent		ase number (if known)	
	☐ Yes		Institution na	me and desc	ription. Separately file th	ne records of any intere	sts.11 U.S.C. § 521(c):	
25.	■ No	-	future intere		rty (other than anythin	g listed in line 1), and	rights or powers exe	ercisable for your benefit
26.	Examp ■ No	oles: Internet of		s, websites, p	ts, and other intellecturoceeds from royalties a		ts	
27.	License Examp ■ No	es, franchise bles: Building	s, and other	general inta sive licenses	ngibles , cooperative associatio	n holdings, liquor licens	es, professional licens	es
M	oney or p	property owe	ed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	□ No	unds owed t		oout them, inc	cluding whether you alre	eady filed the returns an	d the tax years	
					cipated 2015 Federa Refund	I Income Tax	Federal	\$2,578.00
29.	■ No	oles: Past due	or lump sum		usal support, child supp	ort, maintenance, divor	ce settlement, property	settlement
30.	Examp ■ No	oles: Unpaid w benefits;		y insurance į	payments, disability ben someone else	efits, sick pay, vacation	pay, workers' compe	nsation, Social Security
31.		ts in insuran bles: Health, d		insurance; ł	nealth savings account (HSA); credit, homeown	er's, or renter's insural	nce
	☐ Yes. I	Name the ins		iny of each poany name:	olicy and list its value.	Beneficiary	r:	Surrender or refund value:
32.	If you a someo		ciary of a living		someone who has die t proceeds from a life ir		currently entitled to rec	eive property because
33.	Claims	against thire	d parties, whe		you have filed a lawsu		or payment	
	■ No		s, employmen	t disputes, in	surance claims, or right	s to sue		
				ed claims of	every nature, including	g counterclaims of the	e debtor and rights to	set off claims
	■ No	_	ch claim		• ,		3	

Official Form 106A/B Schedule A/B: Property page 4

Debt	Case 16-05499 or 1 Ishtiyaq Ahmed Ans	D	ed 02/19/16 ocument	Entered 02 Page 14 of	2/19/16 16:10:27 54 Case number (if known)	Desc Main
25 /	ny financial assets you did no				,	
_	No	t alleady list				
	Yes. Give specific information.					
_	Tool Orro opposite information.					
36.	Add the dollar value of all of y for Part 4. Write that number l					\$2,810.00
Part	: Describe Any Business-Related	d Property You Own o	r Have an Interest Ir	. List any real estate	e in Part 1.	
37. D	you own or have any legal or equi	itable interest in any b	ousiness-related pro	perty?		
	No. Go to Part 6.					
	es. Go to line 38.					
Part	Describe Any Farm- and Comm If you own or have an interest in fa	ercial Fishing-Related armland, list it in Part 1.	I Property You Own	or Have an Interest	ln.	
46. C	o you own or have any legal o	or equitable interes	t in any farm- or	commercial fishi	ng-related property?	
	No. Go to Part 7.					
	Yes. Go to line 47.					
Part	Describe All Property You	Own or Have an Inter-	est in That You Did	Not List Above		
F2 F	a var have ather property of	any kind yay did n	at already list?			
	o you have other property of a examples: Season tickets, count					
_	No					
	Yes. Give specific information					
54.	Add the dollar value of all of y	our entries from P	art 7. Write that r	umber here		\$0.00
					l	
Part	List the Totals of Each Part	of this Form				
55	Part 1: Total real estate, line 2	,				\$0.00
	Part 2: Total vehicles, line 5			\$5,025.00		Ψ0.00
	Part 3: Total personal and ho	usehold items, line	- 15	\$1,050.00		
58.	Part 4: Total financial assets,			\$2,810.00		
59.	Part 5: Total business-related			\$0.00		
60.	Part 6: Total farm- and fishing		ine 52	\$0.00		
61.	Part 7: Total other property no		+	\$0.00		
62.	Total personal property. Add I			\$8,885.00	Copy personal property to	otal \$8,885.00
63.	Total of all property on Sched	lule A/B. Add line 55	5 + line 62			\$8,885.00

Official Form 106A/B Schedule A/B: Property page 5

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Ishtiyaq Ahmed A	nsari		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if
				amende

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Amount of the exemption you claim

Part 1: Identify the Property You Claim as Exemp	Part 1:	Identify	/ the	Property	/ You	Claim	as	Exem	ot
--------------------------------------------------	---------	----------	-------	----------	-------	-------	----	------	----

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
2008 Honda Civic 62000 miles Line from <i>Schedule A/B</i> : 3.1	\$5,025.00		\$2,400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)	
Misc used household goods and furnishings, including: Sofa, Loveseat, Dining Table/Chairs, Pots/Pans, Dishes/Flatware, Vacuum, Bedroom Sets, Lamps, Misc. Tools Line from Schedule A/B: 6.1	\$400.00		\$400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Television, DVD Player Line from <i>Schedule A/B</i> : 7.1	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Books & Family Pictures Line from Schedule A/B: 8.1	\$50.00		\$50.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)	
				735 ILCS 5/12-1001(a)	_

Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Case 16-05499 Desc Main Page 16 of 54
Case number (if known) Document Debtor 1 Ishtiyaq Ahmed Ansari

Brief description of the property and line on					
Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
Cash Line from Schedule A/B: 16.1	\$150.00		\$150.00	735 ILCS 5/12-1001(b)	
and norm contegue with			100% of fair market value, up to any applicable statutory limit		
Checking: Fifth-Third Bank	\$78.00		\$78.00	735 ILCS 5/12-1001(b)	
and norm deficience Arb. The			100% of fair market value, up to any applicable statutory limit		
Savings: Fifth-Third Bank	\$4.00		\$4.00	735 ILCS 5/12-1001(b)	
ine nom <i>Schedule Alb</i> . 11.2			100% of fair market value, up to any applicable statutory limit		
Federal: Anticipated 2015 Federal	\$2,578.00		\$2,578.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		

u acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

	Case 16-05499	Doc 1 Filed 02/19/16	Entered	1 02/19/16 16:	10:27 Desc	Main
Fill in this i	nformation to identify yo		1 11111. 1 1	\/I ./ -		
Debtor 1	Ishtiyaq Ahmed	d Ansari Middle Name	Last Name			
Debtor 2 (Spouse if, filing		Middle Name	Last Name			
United State	es Bankruptcy Court for the	: NORTHERN DISTRICT OF IL	LINOIS			
Case numbe	er				_	ck if this is an
	orm 106D le D: Creditors	s Who Have Claims	Secured	by Propert	V	12/15
e as complet	te and accurate as possible.	If two married people are filing together, number the entries, and attach it to t	er, both are equal	lly responsible for sup	plying correct informa	
. Do any cred	litors have claims secured by	your property?				
□ No. C	Check this box and submit	this form to the court with your othe	er schedules. Yo	ou have nothing else	to report on this form	١.
Yes.	Fill in all of the information	below.				
Part 1: L	ist All Secured Claims					
2. List all sec	ured claims. If a creditor has r	more than one secured claim, list the cree	ditor separately for	Column A	Column B	Column C
		particular claim, list the other creditors in der according to the creditor's name.	Part 2. As much	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
	ican Honda Finance	Describe the property that secures	the claim:	\$5,365.00	\$5,025.00	\$340.00
Creditor's	s Name	2008 Honda Civic 62000 mi	les			
	Point Blvd , IL 60123	As of the date you file, the claim is: apply. Contingent	Check all that			
Number,	Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the	he debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 o □ Debtor 2 o	•	☐ An agreement you made (such as car loan)	mortgage or secui	red		
	and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
At least on	e of the debtors and another	☐ Judgment lien from a lawsuit				
Check if the community	his claim relates to a ity debt	Other (including a right to offset)	Purchase M	loney Security Int	erest	
	Opened 7/01/11					

Add the dollar value of your entries in Column A on this page. Write that number here: \$5,365.00 If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$5,365.00

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Last Active

1/11/16

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

8982

Date debt was incurred

Debtor 1 Ishtiyaq Ahmed Ansari Frist Name Middle Name Last Name Debtor 2		Cas	e 10-05499	DOC I F	Document	Page 18 of 54).27 Des	oc Main
Debtor 2 (Scouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any security contracts or unexpired leases that could result in a dailm. Also list executory contracts on Schedule A/B: Property Official Form 106A/B) and on any security contracts on unexpired leases that could result in a dailm. Also list executory contracts on Schedule A/B: Property Official Form 106A/B) and on the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2017 2: List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims in the alphabetical dearn, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not its claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims 816 The Creditor's Name 3815 Highland Ave Downers Grove, IL 60515 Number Street City States Lig Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:	Fill in t	this informa	ation to identify you	ır case:	Ducimiem	Paue 10 01 04		
Debtor 2 (Scouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any security contracts or unexpired leases that could result in a dailm. Also list executory contracts on Schedule A/B: Property Official Form 106A/B) and on any security contracts on unexpired leases that could result in a dailm. Also list executory contracts on Schedule A/B: Property Official Form 106A/B) and on the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2017 2: List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims in the alphabetical dearn, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not its claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims 816 The Creditor's Name 3815 Highland Ave Downers Grove, IL 60515 Number Street City States Lig Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:	Debtor	1	Ishtiyag Ahmed	Δnsari				
Spouse if, filing First Name Moddle Name Last A digits of account number Rast Name Last A digits of account number Last Name Last A digits of account number Last	200101	•			Name	Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases (thick claims in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule 62: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on Schedule A/B: Property (Official Form 1			First Name	Middle I	Nome	Loot Nome		
Case number (If known) Check if this is an amended filing Dester 2 or University of the amended filing Check if this is an amended filing Dester 2 on the left is a could be a particular daims. List the other creditors with PRIORITY claims and Part 2 or creditors with NoNPRIORITY claims. List the other creditors and Part 2 or creditors with NoNPRIORITY claims. List the other creditors and Part 2 or creditors with PRIORITY claims and Part 2 or creditors with NoNPRIORITY unsecured claims is an amended in the part 2 or creditor has more than one nonpriority unsecured claims if it is an action in the aphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims is the other creditors in Pa	``	. 0,						
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or Schedule A/B: Property (Official Form 106A/B) and on Schedule A/B: Property (Official Form 106A/B) and Official Form 106A/B: Property (Official For	United	States Bank	cruptcy Court for the	: NORTHER	N DISTRICT OF IL	LLINOIS		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unspirel classes that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106AB/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partialty secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partialty secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partialty secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2: Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 1. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims, list the creditor separately for each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims list out the Continuation Page of Part 2. Total cla	Case n	umber						
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2art 2: List All of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims salready included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Advocate - Good Samaritan Nospital Nonpriority Creditor's Name 3815 Highland Ave Downers Grove, IL 60515 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor	(if known))					_	
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other part y to any executory contracts or unexpired leases that could result in a claim. Also list severatory contracts or necetions with NONPRIORITY claims. List the other part y to any executory contracts or unexpired leases that could result in a claim. Also list severatory contracts or unexpired leases that could result in a claim. Also list severatory contracts or unexpired leases (Official Form 106.0). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106.0). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106.0). Do not include any creditors with partially secured claims Schedule C: Executory Contracts and Unexpired Leases (Official Form 106.0). Do not include any creditors with partially secured claims. Schedule C: Executory Contracts and Unexpired C: Executory C: Execu							_ a	mended filing
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other part y to any executory contracts or unexpired leases that could result in a claim. Also list severatory contracts or necetions with NONPRIORITY claims. List the other part y to any executory contracts or unexpired leases that could result in a claim. Also list severatory contracts or unexpired leases that could result in a claim. Also list severatory contracts or unexpired leases (Official Form 106.0). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106.0). Do not include any creditors with partially secured claims that are listed in Schedule C: Executory Contracts and Unexpired Leases (Official Form 106.0). Do not include any creditors with partially secured claims Schedule C: Executory Contracts and Unexpired Leases (Official Form 106.0). Do not include any creditors with partially secured claims. Schedule C: Executory Contracts and Unexpired C: Executory C: Execu	Officia	al Form	106E/F					
any executory contracts or unexpired leases that could result in a claim. Also list executory contracts and Unexpired Leases (Official Form 106A)b and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106C). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2: Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the other creditors separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Advocate - Good Samaritan Hospital Nonpriority Creditor's Name 3815 Highland Ave Downers Grove, IL 60515 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim:				Who Have	e Unsecured	l Claims		12/15
Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Advocate - Good Samaritan Hospital Nonpriority Creditor's Name 3815 Highland Ave Downers Grove, IL 60515 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claims:								
the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonthing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Advocate - Good Samaritan Hospital Advocate - Good Samaritan Hospital Advocate - Good Samaritan Hospital Last 4 digits of account number When was the debt incurred? Downers Grove, IL 60515 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim:								
Part 1: List All of Your PRIORITY Unsecured Claims No. Go to Part 2.								
1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes.			page year			,		,
■ No. Go to Part 2. Yes.	Part 1:	List All	of Your PRIORITY	Unsecured Cla	aims			
Yes.	_	-		red claims again	st you?			
3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Advocate - Good Samaritan Hospital Nonpriority Creditor's Name 3815 Highland Ave Downers Grove, IL 60515 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claims:			t 2.					
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Best Case Bankruptcy

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

Document Page 19 of 54 Debtor 1 Ishtiyaq Ahmed Ansari Case number (if know) 4.2 \$3,354.00 Amex Last 4 digits of account number 5923 Nonpriority Creditor's Name Opened 12/01/09 Last Active Correspondence Po Box 981540 When was the debt incurred? 9/30/11 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 Amyfin 0608 \$185.00 Last 4 digits of account number Nonpriority Creditor's Name 1821 Walden When was the debt incurred? Schaumburg, IL 60175 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Med1 02 Doctors Immediate Care Lomba Other. Specify 4.4 **Calvary Portfolio Services** Last 4 digits of account number 6522 \$30,339.00 Nonpriority Creditor's Name 500 Summit Lake Dr. Suite 400 When was the debt incurred? Opened 3/01/15 2016 AR 000215 Valhalla, NY 10595 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Collection Attorney Citibank

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 20 of 54 Case number (if know)

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□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	•	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts		☐ At least one of the debtors and another	<u></u> '		
Is the claim subject to offset? ■ No □ Debts to pension or profit-sharing plans, and other similar debts		☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
		_		action agreement or avoice that you did not	
☐ Yes ☐ Other. Specify Credit Card		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
		Yes	■ Other. Specify Credit Card	t	

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 21 of 54
Case number (if know)

Debtor	1 Ishtiyaq Ahmed Ansari		Case number (if know)	
4.8	ComEd	Last 4 digits of account number		\$37.00
	Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?		
	Attn: Bkcy Group-Claims			
	Department Oakbrook Terrace, IL 60181			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	По и		
	■ Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l alaim.	
	☐ At least one of the debtors and another	Student loans	dicialiti.	
	☐ Check if this claim is for a community debt		retion correspond or diverse that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Utilities		
4.9	Discover Financial	Last 4 digits of account number	8413	\$902.00
	Nonpriority Creditor's Name		On an ad 0/04/00 L and Antino	
	Attn: Bankruptcy Po Box 3025	When was the debt incurred?	Opened 9/01/08 Last Active 5/22/11	
	New Albany, OH 43054	mon was the dept meaned.	3/22/11	
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.10	Discover Financial	Last 4 digits of account number	7206	\$794.00
	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ134.00
	Attn: Bankruptcy		Opened 12/01/01 Last Active	
	Po Box 3025	When was the debt incurred?	5/19/11	
-	New Albany, OH 43054 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	По и		
	■ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l alaim.	
	☐ At least one of the debtors and another	Student loans	a Glaiiii.	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	ł	

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 22 of 54

Debtor 1 Ishtiyaq Ahmed Ansari Case number (if know) 4.11 Last 4 digits of account number \$271.00 **DuPage Medical Group** Nonpriority Creditor's Name When was the debt incurred? 15921 Collections Center Dr. Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.12 **Edward Health Ventures** Last 4 digits of account number \$835.00 Nonpriority Creditor's Name Dept. 77-3471 When was the debt incurred? Chicago, IL 60678 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical/Dental Services** Other. Specify 4.13 Last 4 digits of account number **Edward Health Ventures** \$700.00 Nonpriority Creditor's Name 991 Oak Creek Drive. When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 23 of 54

Debtor 1 Ishtiyaq Ahmed Ansari Case number (if know) **Edward Health Ventures EMG** \$112.00 4.14 Family Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3471 Eagle Way Chicago, IL 60678 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Medical 4.15 **Illinois Collection Se** Last 4 digits of account number 8430 \$63.00 Nonpriority Creditor's Name 8231 185th St Ste 100 When was the debt incurred? Opened 5/01/14 Tinley Park, IL 60487 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Radiologists Of Dupage ☐ Yes Other. Specify S.C. 4.16 Med Business Bureau 6209 \$95.00 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? Opened 4/01/14 Suite 400 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Med1 02 Dupage Emg ☐ Yes Other. Specify Phy Conv Care Dow

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 24 of 54 Case number (if know)

Debtor	1 Ishtiyaq Ahmed Ansari		Case number (if know)			
4.17	Nationwide Credit & Collection Inc. Nonpriority Creditor's Name	Last 4 digits of account numb	er <u>3625</u>	\$222.69		
	815 Commerce Dr., Ste 270 Oak Brook, IL 60523	When was the debt incurred?		-		
,	Number Street City State Zlp Code	As of the date you file, the cla	im is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsec	ured claim:			
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sreport as priority claims	separation agreement or divorce that you did not			
	■ No	<u> </u>	paring plans, and other similar debts			
	Yes	Other Specify Medical		_		
4.18	Square One Financial/Cach Llc Nonpriority Creditor's Name	Last 4 digits of account numb	per	\$23,762.00		
	4340 S Monaco St	When was the debt incurred?	Opened 5/01/13			
	2nd Floor			-		
	Denver, CO 80237 Number Street City State Zlp Code	As of the date you file, the cla	im is: Check all that apply			
	Who incurred the debt? Check one.	_	in is shook an that apply			
	■ Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed	and deline			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec ☐ Student loans				
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	report as priority claims	separation agreement or divorce that you did not			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify	ng Company Account Bank Of n. N.A.	-		
trying more t any de	is page only if you have others to be notified ab to collect from you for a debt you owe to some than one creditor for any of the debts that you li bbts in Parts 1 or 2, do not fill out or submit this	out your bankruptcy, for a debt that one else, list the original creditor in sted in Parts 1 or 2, list the addition	Parts 1 or 2, then list the collection agency her nal creditors here. If you do not have additional	e. Similarly, if you have		
		ine 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms		
	x 390106		■ Part 2: Creditors with Nonpriority Unsecured	Claims		
wiinne	apolis, MN 55439	_ast 4 digits of account number				
		On which entry in Part 1 or Part 2 did	·			
	•	_ine 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Clai			
	ox 4257 Stream, IL 60197		Part 2: Creditors with Nonpriority Unsecured	Claims		
		ast 4 digits of account number				
		On which entry in Part 1 or Part 2 did	· •			
	of America lox 1597	_ine <u>4.18</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Clai			
_	k, VA 23501		■ Part 2: Creditors with Nonpriority Unsecured	Claims		
	· ·	_ast 4 digits of account number				
Name ar	nd Address (On which entry in Part 1 or Part 2 did	you list the original creditor?			
CACH		ine 4.18 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Clai	ms		
	AR 000129 S. Monaco St., 2nd Floor		Part 2: Creditors with Nonpriority Unsecured	Claims		
	er, CO 80237					

Last 4 digits of account number

Case 16-05499 Entered 02/19/16 16:10:27 Desc Main Doc 1 Filed 02/19/16

Debtor 1 Ishtiyaq Ahmed Ansari	Document	Case number (if know)
Name and Address Cavalry SPV I LLC Cavalry Portfolio Services 500 Summitt Lakes Drive, Suite 400 Valhalla, NY 10595	On which entry in Part 1 or Line 4.4 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	_	Part 2 did you list the original creditor?
Name and Address Citibank P.O. Box 2036 Warren, MI 48090-2036	Line <u>4.4</u> of (<i>Check one</i>):	Part 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Warren, IIII 40030 2000	Last 4 digits of account num	nber
Name and Address Credit Protection Association PO Box 802068 Attn: Bankruptcy Dept. Dallas, TX 75380-2068	On which entry in Part 1 or Line 4.8 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Doctors Immediate Care 18W511 Roosevelt Rd. Lombard, IL 60148	On which entry in Part 1 or Line 4.3 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address DuPage Emergency Physicians P.O.Box 88667 Chicago, IL 60680-1495	On which entry in Part 1 or Line 4.16 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address HSBC Nevada P.O. Box 1299 Haverhill, MA 01831	On which entry in Part 1 or Line 4.5 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Mira Med Revenue Group P.O.Box 77000 Dept 77304 Detroit, MI 48277	On which entry in Part 1 or Line 4.13 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address MiraMed Revenue Group Department 77304 PO Box 77000 Detroit, MI 48277	On which entry in Part 1 or Line 4.12 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Radiologists of DuPage 520 E. 22nd Streer Lombard, IL 60148	On which entry in Part 1 or Line 4.15 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Radiologists of DuPage P.O.Box 1010	On which entry in Part 1 or Line <u>4.15</u> of (<i>Check one</i>):	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nappriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

■ Part 2: Creditors with Nonpriority Unsecured Claims

Tinley Park, IL 60477

Last 4 digits of account number

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 26 of 54 Case number (if know)

6j.

67,376.69

Debtor 1 Ishtiyaq Ahmed Ansari **Domestic support obligations** 6a. 6a. \$ 0.00 **Total claims** from Part 1 Taxes and certain other debts you owe the government 6b. 6b. 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** Student loans 6f. 0.00 **Total claims** from Part 2 6g. Obligations arising out of a separation agreement or divorce that you 6g. 0.00 did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount here. 6i. 6i. 67,376.69

Total Nonpriority. Add lines 6f through 6i.

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

		I A A A HILLS	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Ishtiyaq Ahmed A	Ansari		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check i
				amende

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Yorktown Apartments
2233 S. Highland
Lombard, IL 60148

State what the contract or lease is for
Debtor is Lessee on a Residential Apartment Lease:
\$1,346.00 per month.

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 28 of 54

		DUGUIIIE	<u>:III Paue zo i</u>	11 34	
Fill in this	information to identify your				
Debtor 1	Ishtiyaq Ahmed A	nsari			
5.1.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ner				
(if known)					Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
1. Do y ■ No □ Yes 2. With	and case number (if known) you have any codebtors? (If y nin the last 8 years, have you a, California, Idaho, Louisiana,	you are filing a joint case, I lived in a community p	do not list either spouse	ry? (Community property sta	tes and territories include
3. In Coli in line	2 again as a codebtor only i 106D), Schedule E/F (Official	ors. Do not include you f that person is a guarar	r spouse as a codebto ntor or cosigner. Make	sure you have listed the cr	th you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to
fill out	: Column 2.				
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor Check all schedules tha	to whom you owe the debt tapply:
2.1				Cohodulo D line	
3.1	Name			_ ☐ Schedule D, line _ ☐ Schedule E/F, line	
				☐ Schedule G, line _	
	Number Street City	State	ZIP Code	_	
				По	
3.2	Name			_ ☐ Schedule D, line _ ☐ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	
	City	State	ZIP Code		

Schedule H: Your Codebtors

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 29 of 54

Fill	in this information to identify your c	ase:		ı			
Del	btor 1 Ishtiyaq Ahr	ned Ansari					
	btor 2 buse, if filing)						
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS				
(If kr	se number		-	□ A		d filing nt showing postpetition chapte s of the following date:	r
	fficial Form 106I			M	M / DD/ Y	YYY	
	chedule I: Your Income complete and accurate as possible.					12/	
spo atta Par	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment	r spouse is not filing w	ith you, do not include informat	ion abou	t your spo	use. If more space is needed	
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse	
	If you have more than one job,	Employment status	■ Employed	☐ Empl		yed	
	attach a separate page with information about additional	p.c.yccc	☐ Not employed		■ Not employed		
	employers.	Occupation	Butcher		Unempo	oloyed	
	Include part-time, seasonal, or self-employed work.	Employer's name	Ultra Food				
	Occupation may include student or homemaker, if it applies.	Employer's address	501 County Farm Road Wheaton, IL				
		How long employed t	here? 08 years		_		
Pai	Give Details About Mor	nthly Income					
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to report for any	line, write	e \$0 in the	space. Include your non-filing	
	ou or your non-filing spouse have more space, attach a separate sheet to		ombine the information for all emp	loyers for	that perso	n on the lines below. If you nee	∍d
				For Deb	otor 1	For Debtor 2 or non-filing spouse	

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

				iling spouse
2.	\$	3,623.00	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	3,623.00	\$_	0.00

Official Form 106I Schedule I: Your Income page 1

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 30 of 54

Deb	tor 1	Ishtiyaq Anmed	d Ansarı			Case	number (if ki	nown)				
						For	Debtor 1			r Debtor 2 n-filing sp		
	Cop	y line 4 here			4.	\$	3,623	3.00	\$_		0.00	
5.	List	all payroll deduc	tions:									
	5a.		and Social Security de	eductions	5a.	\$	362	2.00	\$		0.00)
	5b.	Mandatory conf	ributions for retireme	nt plans	5b.	\$	(0.00	\$		0.00)
	5c.	•	ibutions for retiremer	•	5c.	\$	(0.00			0.00)
	5d.		ments of retirement fu	ind loans	5d.	· -		0.00	\$_		0.00	
	5e.	Insurance			5e.			5.00			0.00	
	5f.	Domestic support Union dues	ort obligations		5f.	\$_ \$		0.00	-		0.00	_
	5g. 5h.	Other deduction	ns Specify		5g. 5h.	· · ·		4.00 0.00	· · —		0.00	_
6.				b+5c+5d+5e+5f+5g+5h.	6.	·		1.00	. · • \$		0.00	_
7.				btract line 6 from line 4.	7.	\$ —	3,152				0.00	_
				otract line o nom line 4.	7.	Ψ_	3,132	2.00	- Ψ_		0.00	<u>,</u>
8.	List 8a.	Net income from profession, or for Attach a statement	arm ent for each property an y and necessary busine	from operating a business d business showing gross ss expenses, and the total	s, 8a.	\$		0.00	\$		0.00	•
	8b.	Interest and div			8b.	. —		0.00	- \$ -		0.00	_
	8c.			non-filing spouse, or a de		Ψ_		J.00	- Ψ_		0.00	<u>,</u>
		regularly receive Include alimony, settlement, and	e spousal support, child property settlement.	support, maintenance, divor	rce 8c.			0.00	\$_		0.00	
	8d.	Unemployment	_		8d.	· : —	(0.00			0.00)_
	8e.	Social Security			8e.	\$_	(0.00	. \$_		0.00	<u> </u>
	8f.	Include cash ass that you receive,		if known) of any non-cash a benefits under the Supplem		\$	(0.00	\$		0.00)
	8g.	Pension or retir	ement income		8g.	\$_	(0.00	\$		0.00)
	8h.	Other monthly i	ncome. Specify:		8h.	+ \$_	(0.00	+ \$		0.00)
9.	Add	all other income.	Add lines 8a+8b+8c+	3d+8e+8f+8g+8h.	9.	\$	(0.00	\$_		0.0	00
10	Calc	ulate monthly inc	come. Add line 7 + line	9	10.		3,152.00	+ \$	-	0.00	= \$	3,152.00
		•		otor 2 or non-filing spouse.			J, 132.00			0.00	_	3,132.00
11.	Inclu othe	ide contributions fr r friends or relative not include any am	om an unmarried partnes.	expenses that you list in Ser, members of your househ	nold, your depe				-			0.00
12.		e that amount on tl		0 to the amount in line 11 les and Statistical Summary				,		e. 12.	\$	3,152.00
											Combi	
13.	Do y	ou expect an inc	rease or decrease with	nin the year after you file t	his form?						month	ly income
	•	Yes. Explain:		eving overtime tempora s not expected to conti			hort staff	ed a	t his o	ompan	y. Thi	s

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 31 of 54

Fill ir	n this infor <u>ma</u>	ation to identify y	our case:					
Debto		Ishtiyaq Ahn		ıri		Checl	k if this is:	
Debto	or 2					_	An amended filing	uing poetpetition chapter
	use, if filing)							wing postpetition chapter the following date:
United	d States Bankr	ruptcy Court for the	NORTH	IERN DISTRICT OF ILLIN	OIS	1	MM / DD / YYYY	
Case (If kno	number							
		orm 106J J: Your	Evner	nege				12/1
Be a infor	s complete mation. If m	and accurate as	s possible eded, atta	. If two married people a ich another sheet to this				or supplying correct
Part 1.	1: Descri	ribe Your House	ehold					
	■ No. Go to	o line 2.	in a separ	ate household?				
	□ N □ Y		st file Offic	ial Form 106J-2, <i>Expense</i>	s for Separate Hous	ehold of Deb	tor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						□ Yes □ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
	expenses o	penses include of people other t d your depende	han $_{\square}$	No Yes				- 103
				h. F.manaa				
expe	mate your ex	a date after the	our bankr	uptcy filing date unless y				apter 13 case to report of the form and fill in the
the v		h assistance an		government assistance cluded it on <i>Schedule I:</i>			Your exp	enses
		or home owners		ses for your residence. I or lot.	nclude first mortgag	je 4. \$		1,346.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner'	s, or rente	's insurance		4b. \$		12.50
				upkeep expenses		4c. \$		0.00
		eowner's associa			mo oquity loops	4d. \$	-	0.00
5.	Auditional	nortgage paym	ents for yo	our residence, such as ho	ine equity loans	5. \$		0.00

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 32 of 54

Debtor 1	Ishtiyaq Ahmed Ansari	Case num	ber (if known)	
. Utilit	es:			
6a.	Electricity, heat, natural gas	6a.	\$	100.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	119.00
6d.	Other. Specify: Cell Phone	6d.	·	100.00
	Home Phone		\$	40.00
Food	and housekeeping supplies	— _{7.}	·	400.00
	care and children's education costs	7. 8.	\$ 	
		9.	·	0.00
	ing, laundry, and dry cleaning		·	160.00
	onal care products and services	10.	·	60.00
	cal and dental expenses	11.	\$	150.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	150.00
	ot include car payments.		·	
	tainment, clubs, recreation, newspapers, magazines, and books	13.		50.00
	table contributions and religious donations	14.	\$	0.00
. Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	¢	0.00
	Health insurance		·	0.00
		15b.	·	0.00
	Vehicle insurance	15c.	*	65.00
	Other insurance. Specify:	15d.	\$	0.00
Spec	•	16.	\$	0.00
	Ilment or lease payments:		•	
	Car payments for Vehicle 1	17a.	·	308.00
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify:	17c.		0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as	40	•	0.00
dedu	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
	payments you make to support others who do not live with you.		\$	0.00
Spec		19.		
	real property expenses not included in lines 4 or 5 of this form or on Sche			
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	r: Specify: Postage/Bank Fees	21.	+\$	30.00
	· · · · · · · · · · · · · · · · · · ·			
	ılate your monthly expenses			
	Add lines 4 through 21.		\$	3,090.50
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,090.50
٠.	data como mandido met la como			· · · · · · · · · · · · · · · · · · ·
	ulate your monthly net income.		•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	3,152.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,090.50
23c.	Subtract your monthly expenses from your monthly income.	230	\$	61.50
	The result is your monthly net income.	23c.	Ψ	01.30
For ex modifi	ou expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your motation to the terms of your mortgage?			or decrease because of a
■ N				
□ Y	es. Explain here:			

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 33 of 54

Fill in this infor	mation to identify your	case:			
Debtor 1	Ishtiyaq Ahmed A	 Ansari			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official Forn					
Declarat	ion About a	ın Individua	I Debtor's Sc	hedules	12/15
Sigi	n Below				
Did you pa	y or agree to pay some	one who is NOT an atte	orney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. N	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the su	mmary and schedules fil	ed with this declaratio	n and
X /s/ Isht	iyaq Ahmed Ansari		X		
Ishtiya	q Ahmed Ansari re of Debtor 1		Signature of	f Debtor 2	
Date F	February 19, 2016		Date		

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 34 of 54

Fill in	this inforr	nation to identify you	r case:								
Debto	or 1	Ishtiyaq Ahmed	Ansari								
		First Name	Middle Name	Last Name							
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name							
Unite	d States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS							
Case	number										
(if know						theck if this is an mended filing					
Offi	cial Fo	rm 107									
Stat	ement	of Financial	Affairs for Individ	luals Filing for B	ankruptcy	12/15					
inform	nation. If m		, attach a separate sheet to		equally responsible for sup y additional pages, write yo						
Part '			arital Status and Where You	Lived Before							
1. V	vnat is you	r current marital statu	IS?								
	Married Not mar	ried									
2. D	uring the la	ng the last 3 years, have you lived anywhere other than where you live now?									
	■ No ■ Yes. Lis	t all of the places you	lived in the last 3 years. Do no	ot include where you live nov	v.						
ı	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there					
					nity property state or territor ico, Texas, Washington and V						
	No				•	·					
	Yes. Ma	ake sure you fill out Sci	hedule H: Your Codebtors (Of	fficial Form 106H).							
Part 2	2 Explai	n the Sources of You	ır Income								
F	ill in the tota	al amount of income yo	nployment or from operatin ou received from all jobs and a I have income that you receive	all businesses, including part		ndar years?					
		l in the details.									
	• res. riii	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$8,780.89	☐ Wages, commissions, bonuses, tips						
			☐ Operating a business		☐ Operating a business						

Official Form 107

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

Page 35 of 54
Case number (if known) Document Debtor 1 Ishtiyaq Ahmed Ansari

				Debtor 1					Debtor 2				
					of income that apply.	(bet	ss income fore deductions lusions)	s and	Sources of inco		Gross income (before deductions and exclusions)		
	For last calendar year: (January 1 to December 31, 2015)		■ Wages	s, commissions, tips		\$53,57	75.00	☐ Wages, com bonuses, tips	missions,				
				☐ Opera	ting a business				☐ Operating a l	ousiness			
		dar year be December		■ Wages	s, commissions, tips		\$49,99	7.00	☐ Wages, com bonuses, tips	missions,			
				☐ Opera	ting a business				☐ Operating a b	ousiness			
				☐ Wages	s, commissions, tips		\$-2,44	6.00	☐ Wages, com bonuses, tips	missions,			
				■ Opera	ting a business				☐ Operating a l	ousiness			
	gambling	and lottery v	vinnings. If yo	ou are filing	a joint case and y	ou hav	e income that	you rece	eived together, list	it only once	suits; royalties; and e under Debtor 1.		
				Debtor 1					Debtor 2				
					of income below	(bet	ess income fore deductions lusions)	s and	Sources of inco		Gross income (before deductions and exclusions)		
		dar year be December		Capital (Gain		\$-3,00	00.00			,		
Pa	rt 3: List	t Certain Pa	yments You	ı Made Befo	ore You Filed for	Bankr	uptcy						
6.	Are either ☐ No.	Neither D	ebtor 1 nor I	Debtor 2 ha	imarily consume as primarily cons family, or househo	umer c	lebts. Consum	er debts	are defined in 11	U.S.C. § 10	01(8) as "incurred by a		
		During the	90 days befo	ore you filed	l for bankruptcy, d	id vou	nav anv credito	or a total	of \$6.225* or mo	re?			
		□ No.	Go to line 7	•		.a you	pay any oreant	, a tota.	0. 40,220 0				
		□ Yes	List below paid that cr	each credito reditor. Do r		nts for	domestic supp				the total amount you and alimony. Also, do		
		* Subject		djustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.									
	Yes.				e primarily conse for bankruptcy, d			or a total	of \$600 or more?	•			
		□ No.	Go to line 7										
		■ Yes	include pay	ments for d							at creditor. Do not include payments to		
	Creditor'	s Name and	d Address		Dates of payme	ent	Total amo	unt	Amount you	Was this	payment for		
								aid	still owe		payment for		

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

Page 36 of 54
Case number (if known) Document Debtor 1 Ishtiyaq Ahmed Ansari

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	payment for
	American Honda Finance 2170 Point Blvd Elgin, IL 60123	Monthly	\$308.00	\$5,365.00	☐ Mortgag ■ Car ☐ Credit 0 ☐ Loan R ☐ Supplie ☐ Other	Card epayment rs or vendors
7.	Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general p corporations of which you are an officer, directincluding one for a business you operate as a support and alimony.	artners; relatives of any ger ctor, person in control, or ov	neral partners; partners of 20% or more	erships of which ye of their voting se	ou are a gene curities; and a	eral partner; any managing agent,
	■ No □ Yes. List all payments to an insider					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason fo	r this payment
			•			
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		ments or transfer a	any property on a	ccount of a	debt that benefited an
		g				
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		r this payment editor's name
Pai	t 4: Identify Legal Actions, Repossessio	ns. and Foreclosures				
9.	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of	the case
	CACH, LLC Vs. Ishtiyaq Ansari 2016 AR 000129	Collection	Circuit Court o County, IL	f Dupage	Pendin On app Conclu	peal
	Cavalry SPV I LLC Vs. Ishtiyaq Ansari 2016 AR 000215	Collection	Circuit Court o County, IL	f DuPage	■ Pendin □ On app □ Conclu	peal
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garni	shed, attach	ed, seized, or levied?
	No					
	☐ Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	d			property

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Page 37 of 54 Case number (if known) Document Debtor 1 Ishtiyaq Ahmed Ansari 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Value Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code)

Part 6: List Certain Losses

15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other
	disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property.*

Date of your loss

Value of property lost

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

□ No

Yes. Fill in the details.

notice@billbusters.com

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Ledford, Wu & Borges, LLC 105 W. Madison 23rd Floor Chicago, IL 60602 Description and value of any property transferred

Date payment or transfer was made Amount of payment

\$1,500.00 for Attorney Fee

02/2016

\$1,500.00

Official Form 107

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Page 38 of 54 Case number (if known) Document

Debtor 1 Ishtiyaq Ahmed Ansari

	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va	alue of any prope	rty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa de as security (such as t	irs? he granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			ny property or eceived or debts hange	Date transfer was made
	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot ■ No □ Yes. Fill in the details.		y property to a sel	lf-settled trus	st or similar device	of which you are a
	Name of trust	Description and va	alue of the proper	ty transferre	d	Date Transfer was made
20.	List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No					
		Last 4 digits of account number	Type of account instrument	clos	e account was ed, sold, red, or sferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yocash, or other valuables? No Yes. Fill in the details. Name of Financial Institution	ear before you filed for Who else had acco		safe deposit		tory for securities, Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)	reet, City,			have it?
22.	Have you stored property in a storage unit on ■ No □ Yes. Fill in the details.	r place other than your	home within 1 ye	ar before you	u filed for bankrupto	ey .
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Page 39 of 54
Case number (if known) Document

Debtor 1 Ishtiyaq Ahmed Ansari

Par	dentify Property You Hold or Control for	Someone Else			
23.	3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.				
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value	
Par	t 10: Give Details About Environmental Inform	nation			
For	the purpose of Part 10, the following definitions	s apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	-	law, whether you now own, operate	, or utilize it or used	
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,	
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.		
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environ	mental law?	
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.				
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Par	11: Give Details About Your Business or Co	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to a	ny business?	
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)				
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	itive of a corporation			

☐ An owner of at least 5% of the voting or equity securities of a corporation

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Page 40 of 54 Case number (if known) Document Debtor 1 Ishtiyaq Ahmed Ansari No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ishtiyaq Ahmed Ansari Signature of Debtor 2 Ishtiyaq Ahmed Ansari Signature of Debtor 1 Date February 19, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 41 of 54

Fill in this informa	ation to identify your	case:				
Debtor 1	Ishtiyaq Ahmed A	nsari				
Dahtar 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS			
Case number						
(if known)					☐ Check if this is an	
					amended filing	
000 : 15	100					
Official For					_	
Statement	t of Intentio	n for Indiv	iduals Filing Un	der Chapter	7 12/15	
If you are an indivi	idual filing under cha	nter 7 vou must fi	Il out this form if:			
	claims secured by yo	-	ii out tiiis ioiiii ii.			
you have leased	d personal property a	and the lease has n	ot expired.			
You must file this	form with the court wer is earlier, unless th	ithin 30 days after	you file your bankruptcy petit e time for cause. You must al			
	ple are filing togethe date the form.	r in a joint case, bo	oth are equally responsible for	r supplying correct infor	rmation. Both debtors must	
	d accurate as possib r name and case nur		s needed, attach a separate sh	neet to this form. On the	top of any additional pages,	
Part 1: List You	r Creditors Who Hav	e Secured Claims				
1. For any creditor	s that you listed in P	art 1 of Schedule [): Creditors Who Have Claims	Secured by Property (O	official Form 106D), fill in the	
information belo	ow. litor and the property t	hat is collateral	What do you intend to do w	vith the property that	Did you claim the property	
			secures a debt?		as exempt on Schedule C?	
Creditor's Am	erican Honda Fina	ince	☐ Surrender the property.☐ Retain the property and re	adeem it	□ No	
namo.			Retain the property and er		■ Yes	
Description of	2008 Honda Civic	62000 miles	Reaffirmation Agreement.			
property			\square Retain the property and [e	xplain]:		
securing debt:						
	r Unexpired Persona					
in the information	below. Do not list rea	al estate leases. Ur		it are still in effect; the le	eases (Official Form 106G), fill ease period has not yet ended.	
Tou may assume a	in unexpired persona	ii property lease ii	the trustee does not assume i	n. 11 0.3.0. 9 303(p)(2).		
Describe your une	expired personal pro	perty leases		Wi	ill the lease be assumed?	
Lessor's name:	Yorktown Apa	rtments			No	
				-	Yes	
Description of lease	Description of leased Debtor is Lessee on a Residential Apartment Lease: \$1,346.00 per month.					
Property:	Denioi is Less	oce on a ivesiden	ны пранинень шазе. Ф1,3	TO.OU PEI IIIUIIIII.		

Official Form 108

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 42 of 54

De	otor 1 Ishtiyaq Ahmed Ansari	Case number (if known)
Pai	t 3: Sign Below	
	er penalty of perjury, I declare that I have indicated my intenti perty that is subject to an unexpired lease.	on about any property of my estate that secures a debt and any personal
X	/s/ Ishtiyaq Ahmed Ansari Ishtiyaq Ahmed Ansari	X Signature of Debtor 2
	Signature of Debtor 1	
	Date February 19, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 47 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Ishtiyaq Ahmed Ansari		Case N	0.	
		Debtor(s)	Chapte	r <u>7</u>	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR	DEBTOR(S)	
c	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation o	g of the petition in bankruptcy	y, or agreed to be p	aid to me, for services rend	lered or to
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received		\$	1,500.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are n	embers and associates of m	ny law firm.
[☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				firm. A
6. I	n return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspec	cts of the bankrupt	cy case, including:	
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Exemption planning; preparation and filing of motions pursuant to 11 USC 	ment of affairs and plan whic rs and confirmation hearing, a ng of reaffirmation agree	th may be required and any adjourned ments and app	; hearings thereof; ications as needed; pro	
7. E	y agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc from one chapter to another; and reopen amending a petition, list, schedule or sta creditors' meetings due to client's failure	chargeability actions or a iing of a closed case. In itement post-filing not du	any other advers a Chapter 7 cas ue to Attorney's	e: jusicial lien avoidan fault, attending additio	ce,
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement fo	r payment to me for	or representation of the deb	tor(s) in
Fe Do	ebruary 19, 2016 ute	Isl Jason P. Alla Jason P. Allain 6 Signature of Attorn Ledford, Wu & E 105 W. Madison 23rd Floor Chicago, IL 6060 312-853-0200 F	3304575 ney Borges, LLC	3	_

LEDFORD, WU & BSRGES, LEC

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105 W. Madison, 23rd Floor, Chicago, IL 60602

ATTORNEY HETERAGEN & STARACT

Responsible attorney:

(312)853-0200 Fax: (312)873-4693

1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford & Wu and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of any inconsistency.

2. Services and Fees: Client retains Attorney for the following services: Chapter 7 (prepetition service only): PLUS \$335 filing fee (court cost) Client retains Attorney for the sole purpose of preparing and filing a Chapter 7 bankruptcy petition (without the required summary schedules and statements). Attorney's duty to further counsel and represent Client ends, and the attorney-client relationship is terminated at the end of the first week after commencement of the case, unless the parties enter into a separate retention contract for postpetition services within that period. If no such contract is executed, Attorney may file a motion to withdraw from the case.
Chapter 7 (service through discharge): \$
fact not known to Attorney in writing at the time of the initial consultation that complicates the case. NSF checks will be assessed a \$20 fee.
 3. Scope of Representation: (a) Attorney will counsel and represent Client in all aspects of the above matter(s) EXCEPT: (1) adversary proceedings; (2) § 722 redemption; (3) judicial lien avoidance; (4) post-discharge litigation; (5) appeals; (6) other: (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon separately by the parties.
4. Initial Consultation. Client acknowledges that Attorney has explained the following (please initial): The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2 The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures The difference among various types of retainer and that Client has made the choice identified in Paragraph 4 TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Other (specify):
Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed.
 5. Client's Duties. Client agrees, during the course of representation, to: (a) provide Attorney with full, accurate and timely information, financial and otherwise; (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents; (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty; (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit; and (e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.
6. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ one or more of the following outside counsel, at Attorney's expense, to work on this case: Kathleen W. Vaught, Kelly M. Johnson, Wayne J. Skelton, Christina Banyon, David Hall Carter, and
7. Termination . Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and Client authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.
X I. A. Ansans X Date: 2/12/16
Attorney signature:ARDC #ARDC #

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main

LEDFORD, WU & BORGES, LLC

105 W. Madison, 23rd Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

CONSULTATION AGREEMENT

FOR OFFICE USE
Client No. 66662
Interviewing Attorney: EDB
Date: 2-12-16

THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- **4. Services**: The attorney agrees to provide Client with the following services:
 - a. analyzing Client's financial circumstances based on information provided by Client;
 - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
 - c. if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's options, informing Client what additional information Client needs to provide in order to enable Attorney to provide such advice and information;
 - d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and
 - e. to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client

5. 3	Fees (check one):
Ĺ	A consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-clien relationship shall terminate at the conclusion of the interview
	Client agrees to pay \$ in nonrefundable consultation fee
for	the event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charge the case, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signe Client and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detaile

explanation of the parties' obligations and a breakdown of the costs.

6. Acknowledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to Client is the date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and information mandated by Section 527(b) of the Bankruptcy Code.

Case 16-05499 Doc 1 Filed 02/19/16 Entered 02/19/16 16:10:27 Desc Main Document Page 50 of 54

United States Bankruptcy Court Northern District of Illinois

In re	Ishtiyaq Ahmed Ansari		Case No.	
		Debtor(s)	Chapter	7
	VEI	RIFICATION OF CREDITOR MA	TRIX	
		Number of Cr	reditors:	32
	The above-named Debtor(s) I (our) knowledge.	hereby verifies that the list of creditors	s is true and	correct to the best of my
Date:	February 19, 2016	/s/ Ishtiyaq Ahmed Ansari Ishtiyaq Ahmed Ansari Signature of Debtor		

ACA International PO Box 390106 Minneapolis, MN 55439

Advocate - Good Samaritan Hospital 3815 Highland Ave Downers Grove, IL 60515

Advocate Good Samaritan Hospital PO Box 4257 Carol Stream, IL 60197

American Honda Finance 2170 Point Blvd Elgin, IL 60123

Amex Correspondence Po Box 981540 El Paso, TX 79998

Amyfin 1821 Walden Schaumburg, IL 60175

Bank of America P.O. Box 1597 Norfolk, VA 23501

CACH, LLC 2016 AR 000129 4340 S. Monaco St., 2nd Floor Denver, CO 80237

Calvary Portfolio Services 500 Summit Lake Dr, Suite 400 2016 AR 000215 Valhalla, NY 10595

Calvary Portfolio Services 500 Summit Lake Dr Ste 400 Valhalla, NY 10595 Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cavalry SPV I LLC Cavalry Portfolio Services 500 Summitt Lakes Drive, Suite 400 Valhalla, NY 10595

Chase Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank P.O. Box 2036 Warren, MI 48090-2036

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181

Credit Protection Association PO Box 802068 Attn: Bankruptcy Dept. Dallas, TX 75380-2068

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Doctors Immediate Care 18W511 Roosevelt Rd. Lombard, IL 60148

DuPage Emergency Physicians P.O.Box 88667 Chicago, IL 60680-1495

DuPage Medical Group 15921 Collections Center Dr. Chicago, IL 60693 Edward Health Ventures Dept. 77-3471 Chicago, IL 60678

Edward Health Ventures 991 Oak Creek Drive. Lombard, IL 60148

Edward Health Ventures EMG Family 3471 Eagle Way Chicago, IL 60678

HSBC Nevada P.O. Box 1299 Haverhill, MA 01831

Illinois Collection Se 8231 185th St Ste 100 Tinley Park, IL 60487

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

Mira Med Revenue Group P.O.Box 77000 Dept 77304 Detroit, MI 48277

MiraMed Revenue Group Department 77304 PO Box 77000 Detroit, MI 48277

Nationwide Credit & Collection Inc. 815 Commerce Dr., Ste 270 Oak Brook, IL 60523

Radiologists of DuPage 520 E. 22nd Streer Lombard, IL 60148

Radiologists of DuPage P.O.Box 1010 Tinley Park, IL 60477

Square One Financial/Cach Llc 4340 S Monaco St 2nd Floor Denver, CO 80237